This form may be completed online, printed and mailed to the address listed below.

STATE APPLICATION FOR NURSE AIDE TRAINING PROGRAM APPROVAL

Name and Address of Entity Conducting Course					
Location of Course					Dates of Course
Name of R.N. Administering the Course					R.N. License Number
Name, Profes	sion, and Lice	nse Number of	Each Instructor		
The follo	wing course c	urriculum mate	rials must be submitted t	or review: 175 NAC 13 002 0	3
	wing course curriculum materials must be submitted for review: 175 NAC 13 002.03 The title of the course;				
	The sponsor's;				
	The names and authors of all textbooks to be used, if any, including the publisher and edition, or if no textbook is to be used, a list of written materials to be used, if any, including the source of such materials;				
	The specific objectives for the course;				
	The hours to be spent on each unit within the components required by 004.02A-C or 005.03A-B of 175 NAC 13, as applicable;				
002.03F	The hours to be spent on each unit within the components required by $004.02A-C$ or $005.02A-B$ of 175 NAC 13, as applicable;				
002.03G	The method(s) of instruction for each unit listed in 002.03E, above (e.g., lecture, demonstration, simulation, slide presentation, film strip, etc.);				
002.03H	A description of the practical training to be provided for each unit in 002.03E;				
002.031	The reading assignment in the text or in other materials, if any, for each unit;				
002.03J	The evaluation method for each unit (e.g., written examination, student presentation or demonstration, competency check-off, etc.);				
002.03K	An explanation of when students will be evaluated (e.g., after each unit, comprehensively at the end of the course);				
	An explanation of the grading system to be used for written examinations and proficiency evaluations; and A list of tasks and duties connected with each unit listed in 004.02A-C or 005.03A-B on which students will be evaluated for competency, and guidelines for examinations to be used, which shall include, at a minimum:				
002.03M1 Procedures to be followed in administering examinations;					
	OO2.03M2 Procedures to be followed to insure security of examinations, both during administration and otherwise, including but not limited to the number of times a particular examination will be used;				
002.03M3 Procedures to be followed to validate the examinations as testing competency in the unit being tested; and					
002.03M4 Procedures to be followed in reporting the grades to the sponsor and the Department.					
CURRICU	LUM MATERIAL	S ABOVE EXCE		THE COURSE WILL BE VARIED	MENT APPROVAL NEED NOT SUBMIT IN ANY MANNER FROM THE APPROVED
Titl	e of Approve	d Course	Name of Entity Wh	ose Course is To Be Used	Date of Dept. Approval
Submitte	d by (typed or	printed name)			•
Administ	ator or Opera	ting Officer			
Date Signature of Administrator					

Mail to: Nebraska Health and Human Services, R&L

Credentialing Division

PO Box 94986

Lincoln, NE 68509-4986